

Past Papers for Economics

Mid-Term

1-There are various categories of healthcare costs. Which of the following best represents a direct medical cost and an indirect nonmedical cost, respectively?

- A. Pain and transportation
- B. Drugs and suffering
- C. Mortality and morbidity
- D. Medical professional time and lost productivity

Answer: D

2-The appropriate use of cost-minimization analysis requires which of the following to be true? *

- A. Costs must include measures of lost productivity
- B. Outcomes must be adjusted for quality of life
- C. Data must be obtained from similar sources
- D. Consequences for each alternative must be equivalent

Answer: D

3-Which of the following are distinguishing characteristics of a "full" economic evaluation?

- A. Comparison of two or more treatment options
- B. Determination of the least expensive treatment alternative
- C. Both costs and consequences of the treatment alternatives are examined
- D. A and C
- E. A and B

Answer: D

4-The economic evaluation method, cost-effectiveness analysis, would be best applied in which of the following cases?

- A. When comparing two or more treatment alternatives that differ in humanistic outcome
- B. When comparing two or more treatment alternatives that are equal in clinical outcome
- C. When comparing two or more treatment alternatives that differ in clinical outcome
- D. When comparing two or more treatment alternatives that differ in cost

Answer: C

5-When quantifying the value of a clinical pharmacy service, your goal is to express the benefits associated with this service in a dollar value. Which economic evaluation method would you employ?

- A. Cost-benefit analysis
- B. Cost-effectiveness analysis
- C. Cost-minimization analysis
- D. Cost-utility analysis

Answer: A

6-Which of the following statements provides the best description of an incremental cost-effectiveness ratio?

- A. A summary measurement of efficiency
- B. The cost per benefit of a new strategy, independent of other treatment alternatives
- C. The extra cost to obtain an extra benefit realized from switching from one alternative to another
- D. The cost per quality-adjusted life-year gained

Answer: C

7-Which of the following is wrong regarding scarcity? *

- A. It is a relative term
- B. The state of no resources at all
- C. It depends on the requirements
- D. Economics is interested in scarcity

Answer: B

8-All problems in economic studies stem from:

- A. Unnecessary wants
- B. Scarcity
- C. Lack of knowledge
- D. Miscommunication

Answer: B

9-The measurement unit in cost-utility analysis (CUA) is:

- A. Physical units
- B. Dinars
- C. QALYs

D. No unit because the outcomes are always equal

Answer: C

10-A QALY of 1 means*

A. Perfect health

B. Fair health

C. Coma

D. Death

Answer: A

11-Which if the following is true?

-Using QALY is more humanistic while ICER is economic

12-Which of the following is false regarding cost-benefit evaluation?

A. It can be highly biased

B. It is the most common type of health economic evaluation

C. It is the most comprehensive method of economic evaluation

D. The perceived needs impact the results

Answer: B

13-Both benefits and costs are quantified in monetary terms in*

A. CBA

B. CUA

C. CEA

D. None of the above

Answer: A

14-Which of the following can be easily used in different areas of economics?*

A. CBA

B. CUA

C. CEA

D. CMA

Answer: A

15-The broadest perspective in economic evaluation is:

- A. Payer perspective
- B. Societal perspective
- C. Provider perspective
- D. Patient perspective

Answer: B

16-The outcome is described as one generic unit in*

- A. CBA
- B. CUA
- C. CEA
- D. CMA

Answer: B

17-Which of the following is an example of dominance?*

- A. High effectiveness and high cost
- B. Low effectiveness and low cost
- C. High effectiveness and low cost
- D. A+B

Answer: C

18-From the perspective of a provider, which one of the following is a direct cost of health care?

- A. The amount paid out-of-pocket by patients directly to their physicians for a clinic visit.
- B. The patient charge for a visit to an emergency department.
- C. The prescription cost of insulin at the community pharmacy.
- D. The salary of the clinical pharmacist who monitors a patient's therapy.

Answer: D

19-From the perspective of an employer, indirect costs are best described by which one of the following?

- A. Hospitalization costs borne by the patient.
- B. Drug effects on patient functioning.
- C. Loss of patient income associated with missed workdays.
- D. Family caregiving costs.

Answer: B

20-The costs and consequences of health care can be different depending on the perspective of the evaluation. Costs from a patient's perspective are best described as which one of the following?

- A. Essentially, what patients are charged for a product or service.
- B. Essentially, the true cost of providing a product or service, regardless of the charge.
- C. Essentially, the charges allowed for a health care product or service.
- D. Essentially, the cost of giving and receiving medical care, including patient morbidity and mortality.

Answer: A

21-Which one of the following constitutes a full economic evaluation?

- A. Two antibiotics are compared and relative cure rates are determined.
- B. The costs for treatment of hypertension by general practice physicians, versus pharmacists, are considered in light of the blood pressure control achieved.
- C. The costs and efficiency of treatment of hypercholesterolemia with a new HMG-CoA reductase inhibitor are determined.
- D. The acquisition costs of two therapeutically equivalent antihypertensive agents are compared.

Answer: B

22-Which one of the following is an example of a partial economic evaluation?

- A. A comparison of the costs and consequences of two alternatives.
- B. A cost-utility analysis.
- C. A comparison of the costs of two equally effective alternatives.
- D. A quality of life comparison of multiple treatment alternatives.

Answer: D

23-Which one of the following is true of partial economic evaluations?

- A. Partial evaluations should be performed as components of full economic evaluations.
- B. Partial evaluations assess all important components necessary for a complete economic analysis.
- C. Partial evaluations may provide a description of the costs, or consequences, of competing alternatives.
- D. Partial evaluations compare the costs and consequences of two treatments.

Answer: C

24-Which one of the following statements is not true about cost-minimization analysis?

- A. Cost-minimization analysis is a tool used to compare the costs of two or more treatment alternatives.
- B. Cost-minimization analysis shows only a cost- savings of one treatment alternative over another.
- C. Cost-minimization analysis measures the costs of treatment alternatives in dollars and assumes comparable efficacy.
- D. Cost-minimization analysis is a method to be used when no evidence exists to support the therapeutic equivalence of two or more treatment alternatives.

Answer: D

25-When conducting a cost-benefit analysis (CBA), the results are best expressed as which one of the following?

- A. Cost-benefit ratio.
- B. Average cost per utility.
- C. cost-savings.
- D. Incremental cost ratio.

Answer: A

26-When quantifying the value of a clinical pharmacy service, which one of the following economic evaluation methods is the best to use?

- A. Cost-benefit analysis.
- B. Cost-effectiveness analysis.
- C. Cost-minimization analysis.
- D. Cost-utility analysis.

Answer: A

27-Which one of the following statements does not describe a cost-effective treatment alternative?

- A. Less expensive and less effective, where the lost benefit was worth the extra cost.
- B. Less expensive and at least as effective.
- C. More expensive with an additional benefit worth the additional cost.
- D. Less expensive and less effective, where the extra benefit is not worth the extra cost.

Answer: A

28-Which of the following would not be considered a commonly measured dimension of health-related quality of life?

- A. Physical health and functioning
- B. Psychological health and functioning
- C. Social and role functioning
- D. Sexual functioning
- E. Perceptions of general well-being

Answer: D

29-The following are examples of preference-based measures of health-related quality of life except:

- A. QWB.
- B. SF-36.
- C. HUI.
- D. EQ-5D.

Answer: B

30-The following statements are true about quality-adjusted life years (QALYs) except

- A. QALYs can result from increasing length of life.
- B. QALYs can result from enhancing quality of life.
- C. QALYs gained is the most common outcome measure in cost-utility analysis.
- D. QALYs can only result from increases in both length and quality of life.

Answer: D

31-In regard to the SF-36, the following statements are true except

- A. it is considered a health profile.
- B. it is a disease-specific instrument.
- C. data from it can produce mental and physical component summary scores.
- D. it is one of the most commonly used health-related quality-of-life Instruments

Answer: B

32-When comparing treatment alternatives, which one of the following is the most correct application of cost-utility analysis?

- A. Alternatives that are life-extending with serious side effects.
- B. Alternatives that differ in cost.
- C. Alternatives that differ in efficacy and safety.
- D. Alternatives that are similar in clinical and humanistic outcomes.

Answer: A

33-ICER has to be calculated if the new drug is located in in the cost-effect difference graph.*

- A. Northeast quadrant
- B. Northwest quadrant
- C. Southeast quadrant
- D. None of the above

Answer: A

34-An example of direct medical cost is:

- A. Transportation cost
- B. Hospital stay cost
- C. Missed days at work
- D. Pain

Answer: B

35-An example of direct medical cost is:

- A. Cost of treatment time
- B. Suffering
- C. Transportation cost
- D. None of the above

Answer: A

36-Define the following:

Price: the amount of money needed to buy a product -including profit-

ICER: the cost needed for an extra benefit gained from switching from option A to B

Economic evaluation: to identify, measure, and value the costs of alternatives to get the most effective outcome with the available resources

Total cost: total resources used multiplied by unit cost

37-Which of the following is a mismatch?

- A. Cost-benefit analysis – comparing costs and willingness to pay for two alternatives
- B. Cost-utility analysis – Comparing costs and QALYs gained from two alternatives
- C. Cost-minimization analysis – two alternatives having different outcomes

D. All of the above are correct

Answer: C

38-In the cost-effectiveness plane, a drug in the southeastern quadrant should be approved*

A. True

B. False

Answer: True

39-When comparing two alternatives, incremental cost excludes the common fixed costs

A. True

B. False

Answer: True

40-Indirect costs include**

A. Cost of lost hours or loss of productivity

B. Cost of prescribed drugs

C. Travelling cost

D. Hospital parking

Answer: A

41-The indirect cost is most likely to be paid by the payer

A. True

B. False

Answer: False

42-The direct medical cost can be paid by the payer

A. True

B. False

Answer: True

43-Lab tests costs are*

A. Direct medical

B. Direct non-medical

C. Indirect

D. None of the above

Answer: A

44-Days missed are paid by the provider

- A. True
- B. False

Answer: False

45-Rent of a room for establishing a clinic is:

- A. Variable cost
- B. Fixed cost
- C. Intangible cost
- D. Indirect medical costs

Answer: B

46-Which one of the following statements regarding the perspective of economic evaluations is true?

- A. Economic evaluations are valid only if conducted from a single perspective
- B. Economic evaluations can be conducted from multiple perspectives.
- C. Economic evaluations should only be conducted from the perspective of the patient.
- D. Society is the only valid perspective for economic evaluations

Answer: B

47- Generally, to compare the two interventions (use of painkillers) and (In-vitro fertilization) we can use:

- A. CBA
- B. CUA
- C. CMA
- D. A+B

Answer: D

48-Cost of using a special diet as the patient gets the intervention is considered:

- A. Direct medical
- B. Direct non-medical
- C. Indirect
- D. Intangible

Answer: B

49-The cost related to returning early to work or being able to work for longer time is:

- A. Direct medical
- B. Direct non-medical
- C. Indirect
- D. Intangible

Answer: C

50-Two hypertension treatments are being compared on a national level in terms of total cost and lives saved by using them.

Drug A: cost = 40 thousand Dinars, lives saved = 5.

Drug B: cost = 140 thousand Dinars, lives saved = 10.

Calculate the cost-effectiveness ratio of drug A.

- A. 20
- B. 100
- C. 8
- D. 14

Answer: C

51-Calculate the ICER from the previous question.

- A. 20
- B. 100
- C. 8
- D. 14

Answer: A

52-The costs and consequences of health care can be different depending on the perspective of the evaluations. Costs from a patient's perspective are best described as which one of the following?

- A. What patients are charged for a product or service.
- B. Essentially, the true cost of providing a products or service, regardless of the charge.
- C. Essentially, the charges allowed for a health care product or service.
- D. The cost of giving and receiving medical care, including patient morbidity and mortality.

Answer: A

Good Luck